



PURCHASING DIVISION  
**SOLE /SINGLE SOURCE OR PIGGYBACK PURCHASE  
 JUSTIFICATION FORM**

To ensure transparency and compliance, Sole/Single Source and Piggyback purchase requests must be approved in advance and accompanied by appropriate written documentation. This form, along with the required supporting materials, satisfies that requirement.

Purchases up to \$50,000 may be approved by the City Manager. Any purchase exceeding \$50,000 requires Commission approval.

Piggyback contracts are awarded for the full duration of the original agreement and are available for use by all City departments.

|                                 |               |
|---------------------------------|---------------|
| <b>Requested By</b>             | Mark Zrallack |
| <b>Department</b>               | Engineering   |
| <b>Purchase Requisition No.</b> |               |
| <b>Supplier Name</b>            | Temple, Inc.  |
| <b>Price</b>                    | \$296,976.00  |

**Please check the appropriate section and provide detailed justification along with department head approval.**

  X   **Sole Source** The specified supplier is the ONLY provider or products/service as described on the purchase requisition. A quotation MUST be attached, and the prices/terms set forth are deemed reasonable for the values presented.

**Justification for Sole Source.** Attach vendor documentation certifying that the vendor is the only source for the products or services in question and /or holds the production, copyrights, trademark, and/or holds production, copyrights, trademark, and/or patent to the item, and check the following applicable statements:

- The vendor holds the exclusive distribution rights for the item in question.
- The item/service to be purchased is the only item/service compatible with existing equipment owned by the City of Fort Pierce.
- The vendor is the single provider of goods or services which have unique characteristics essential to the needs of the program to perform the intended function AND no other product will be suitable for use by the City of Fort Pierce.

Describe what is unique about the product, service or source and steps taken to confirm unavailability of competition as appropriate:

The Glance system is currently in use by St. Lucie County and the City of Port Saint Lucie. This will allow the existing equipment already installed in Saint Lucie County Fire Department vehicles to utilize the preemption system in Fort Pierce. No other brands or equipment will work with this system.

   **Single Source.** The specified supplier was selected to complement/support the following business decision. A quotation MUST be attached, and the prices/terms set forth are deemed reasonable for the values presented. Please check the appropriate box and provide additional information:

- Standardized System     Parts provided by "OEM"     Other (Please explain below):

**What steps were taken to verify that these features are not available elsewhere?**

Other brands/manufactures were examined (please list names and phone numbers and explain why they are not suitable for use by the City - attach additional pages as necessary):

According to the manufacturer of the Glance System, they are the sole provider of this equipment and no other brands of equipment will work with the equipment already installed in Saint Lucie County and the City of Port Saint Lucie.

Other vendors were contacted (please list names and phone numbers and explain why those contacted would not meet the needs of the City-attach additional pages as necessary).

**Piggy-back** – “Piggy-back” purchase on another government entity’s contracts, provide public agency’s name, contract or bid number, contact information, contract start & expiration date, proof of publication, notice of award. Contract no: \_\_\_\_\_

Check on of the following:

The undersigned requests procurement from the vendor identified as the sole/single source supplier of the material/service described in this sole/single source justification and is authorized as a sole/single source for the material/service.

The undersigned requests procurement from the vendor identified by way of Piggyback described in this justification.

Requestor Signature 

Date 9/24/25

Department Head Signature 

Date 9/24/25

The Purchasing Division has reviewed the request and has completed the required due diligence per the Purchasing Ordinances, Section 2-439(a)(5). The Purchasing Division recommends the following:

Sole Source       Single Source       Piggyback

**Purchasing Agent/Specialist**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Purchasing Manager**

Name Gelencia Carter

Signature 

Date 9-24-25